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ABSTRACT

This paper addresses issues in the use of facilitated communication with persons having severe communication impairments, including autism. The research on facilitation is summarized, indicating that the vast majority of studies have found no evidence of communication but have found evidence of facilitator influence on the communicator's response. Difficulties in proving true communication with this approach are noted. Questions about the reliability and generalizability of positive results are raised. Ethical, legal, and social concerns in the use of this methodology are also raised. These include differences between groups over whether facilitated communication should be used with a particular individual, risks of legal liability (as in accusations of sexual abuse under facilitated communication), and the social impact of such allegations on family or staff. Guidelines are suggested, which include evaluating the individual for ability to communicate without facilitator influence. The importance of establishing baseline communication competency is stressed. Above all, further research is urged to find out the conditions under which autistic individuals can communicate as well as finding methods for preventing facilitator cuing. (DB)

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FACILITATED COMMUNICATION: EMPIRICAL DATA AND CONSIDERATIONS FOR PRACTICE

Facilitated communication, a technique of augmented communication that utilizes a facilitator to provide physical support for a person's hand, wrist, or arm while they spell out words, has received much popular attention since its description in this country by Bicklen and others. The apparent success of this technique in providing a communication modality for persons with severe communication impairments, epecially those with autism, has raised questions concerning our understanding of autism, and has led to difficult questions about the role of schools, professionals, and court systems in providing adaptive communication supports for such persons. This session will provide empirical data, issues from parents and school systems, and legal implications and findings that address the future role of facilitated communication as practice.

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Facilitated Communication, a technique of augmented communication that utilizes a facilitator to provide support for a person's hand, wrist, or arm while they spell out words, has received much popular attention since it was described in this country by Bicklen (e.g. 1990). In addition to presentations on such national television programs as "20/20", the technique has drawn thoughtful comment from such writers as Cummins and Prior (1992) and Jacobson and Mulick (1992). The discussion over facilitated communication centers on claims that it has uncovered previously unsuspected language abiites in persons with autism, and over early accounts that the technique had been successful with virually all persons with whom it had been tried. To date, these claims have not been demonstrated through controlled, rigorous studies published in peer-reviewed professional journals. Nonetheless, facilitated communication has been introduced at a rapid pace around the country, to the extent that some parents and school districts have exerted substantial pressure on service providers to include facilitated communication in people's service plans.

The present panel discussion will explore the use of facilitated communication from three perspectives. The first presenter will describe typical training programs that incorporate facilitated communication, will describe a method for evaluating persons for potential benefit from that technique, and will discuss program and outcome issues that derive from its use. The second presenter will present empirical data from several

studies that have been contucted to validate facilitated communication, and discuss the implications of those data for future practice. The third presenter will discuss administrative, legal, ethical, and family issues related to the use of facilitated communication. The remainder of the panel session will be devoted to answering questions from the audience.

Review of Data

Green (unpublished manuscript) has developed a compendium of studies on facilitation (see Table 1). As shown in the Table, empirical evidence of facilitated communication is generally lacking. Outside of Calculator and Singer (1992), in which the study was poorly designed and only briefly described, and Attwood and Remington-Gurney (1992), in which controls were not described, the vast majority of studies have found no evidence of communication. In addition, most studies reported clear evidence of facilitator influence on the communicator's responses.

The outcomes of these studies leave some questions unanswered. First, the negative outcomes only mean that no communication occurred under the conditions of those studies -- not that the subjects might not be able to communicate under other conditions. For example, many of the studies rely on a subject having to communicate something from memory, e.g. message passing, recall of stimulus pictures or objects, etc. Some studies also require specific types of expressive communication, e.g. object naming. Many of the studies did not provide baseline data to show that the subjects were capable of performing those

tasks, prior to introducing the test procedure.

A second question, for some studies, concerns the reliability of any positive results found. For example, in some early studies (e.g. Intellectual Disability Review Panel, 1989), a small number of subjects provided correct responses on a small percentage of trials. It is not clear, in those cases, whether the correct responses were made at greater than chance level. Also, where positive results were reported on a larger scale, but were based on qualitative rather than empirical data (e.g. Attwood and Remington-Gurney, 1992), it is not clear as to whether those subjects would test positively in an empirical study. In addition, it is not clear how generalizable the positive findings are, i.e. whether the subjects showing positive results can all do so across many facilitators or environments.

The most serious issue concerning the data to date on facilitated communication is that all of the studies showing negative results have found some facilitator influence, and that the only study reporting a large nubmer of subject with positive results did not directly test for facilitator influence. This finding suggests that, even where a person is capable of communicating with facilitation, the possibility exists that their communication may be cued or otherwise impacted on by the facilitator, on any given occasion. As a consequence, no facilitated communication can be treated as wholly credible, unless each and every communicaition is validated.

Legal and Clinical Implications

The current state of the evidence leads to a number of

problems associated with the use of facilitated communication, including ethical, legal, and social concerns. The fact that there are many people who advocate ferverently for the use of facilitated communication for all persons with autism, even in the face of equivocal research results, means that service providers must make judgements about its implementation. It is not unusual for parents, school boards, administrators, and clinicians to be at odd over whether facilitated communication should be used with a particular person, or even as a matter of general practice. Clinicians can find themselves in a position of being requested or ordered to provide a service that they may not believe in. Examples include psychcligists being asked to perform intellegence testing using facilitated communication, being asked to verify the credibility of a person making an allegation of abuse, through facilitated communication, or being asked to design a treatment plan for a person, incorporating facilitated communication.

In addition to the ethical questions, there is an increasing risk of legal liability in the use of facilitated communication. At this time, there have been over a score of legal cases brought, where a family or staff member has allegedly been accused of physical, sexual, or mental abuse, via facilitated communication. To date there has been only one convicition, based on a staff person's confession. In all other cases, either charges are still pending, or the case has been dropped due to lack of corroborating evidence and/or the inadmissability of a facilitated accusation. Such cases have now opened the door for

retaliatory suits over maliscious prosecution, and increasingly may focus on clinicians, teachers, or administrators who use facilitation, without assurance that it is actually working.

The social concerns over the use of facilitated communication have to do with the impact of allegations of abuse on the family or staff members who are accused. Although most legal cases to date have been dropped or dismisssed, the impact of the investigation and legal process on the accused and on the accusor is traumatic. If a family member is accused, the son or daughter is typically removed from the parents' custody, and the parent may be arrested and incarcerated. In some types of jobs, e.g. schools, a parent accused of abuse must be suspended. The son or daughter's life is drastically altered during the investigation and/or trial. The legal process typically takes a year or more to resolve. In the case of a staff person, they may be suspended or terminated, and at the least would have their work environment changed. Unless they choose to appeal or bring suit, a staff person can be found giuilty of abuse, terminated, and entered into a state register of abusers, on much less evidence than in a court proceeding.

Future Directions for Use of Facilitated Communication

Given the lack of empirical evidence that many persons with autism can communicate with facilitation, several precautions should be considered. First, consider evaluating each person who might use facilitated communication, before implementing the technique, for their ability to do so without facilitator influence. All of the empirical methods of validation that have

been described so far are capable of detecting facilitater influence, because all incorportate a condition in which stimulus material known only to the facilitator is presented, while the communicator is presented with different material. If the facilitator's information is reflected in the response, their influence on the subject is demonstrated. Existing methods for validation are not all comparable in their ability to detect communication competencey, because they do not all provide baseline estimates of competency, and they do not all control for the impact of the test procedure itself on subjets' responses. A study is currently being conducted by the present author, to address those issues.

A second precaution is to develop and follow strict guidelines for the use of facilitation. These should include who can provide facilitation, what training and supervision they should have, safeguards against facilitator influence, methods for investigating allegations of abuse, etc. It has even been suggested that facilitation should be treated as an experimental technique, requiring Human Rights Committee approval, informed consent, etc.

A third issue is that much more research needs to be done. The empirical data suggest that a much smaller percentage of persons with autism can benefit from facilitation than had originally been claimed by its proponents. However, because those results are negative findings, we only know that there are some conditions under which people do not communcate with facilitation. We do not know whether there are other conditions

under which those same people can communicate, and we do not know whether the methods used to date to validate facilitated communication are the best methods. Also, much needs to be explored with respect to facilitator influence. If there are, in fact, some persons for whom facilitation is helpful, how do we buffer those persons from facilitator cuing? Are there methods for preventing facilitator cuing that do not negtively impact on the facilitation process? Finally, we know little or nothing about how or why facilitation may work with some people. Such knowledge should certainly allow us to enhance and refine the techniques, to make it more efficient, and possibly more generalizable.

References

Bicklen, D. (1990). Communication unbound: Autism and praxis. Harvard Educational Review, 60, 291-314.

Cummins, R.A. and Prior, M.P. (1992). Autism and assisted communication: A response to Bicklen. Harvard Ecucational Review, 62, 228-241.

Jacobson, J.W. and Mulick, J.A. (1992). Speak for youself, or...I can't quite put my finger on it. Psycholgy in Mental Retardation and Developmental Disabilities: The Official Publication of Division 33 of APA. 17, 3-6.